

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup> Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

IA ETHICS AND  
Filed 10-17 + postmarked  
2008 OCT 22 PM 2:07 10-17

COMMITTEE NAME (Must be same as on Statement of Organization)

Rayhons for State Representative

IMPORTANT: Indicate by # type of committee you are reporting for

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Henry V. Rayhons

Political Party (if applicable)

Republican

Office Sought

State Representative

District (if Senate or House)

11

FORM <b>DR-2</b> (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>968</u>
Logged in	<u>S</u>
Scanned	
Computer	<u>WRS</u>
Audited	<u>10 page</u>

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Henry V. Rayhons

641-923-2979

10-17-08

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A

10-19-08

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

(report date)

indicated by 1

☐ CHECK IF AMENDMENT TO REPORT DATED

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 11,694.16

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

13,952.50

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 25,646.66

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

10,022.01

Schedule F: Loan Repayments total (Attach Schedule F)

13,250.00

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$ 2,374.65

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

0

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

755.82

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

0

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES X NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

0

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

2008 OCT 17 AM 8:52

COMMITTEE NAME (Must be same as on Statement of Organization)

Rayhons for State Representative

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(11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Henry V. Rayhons

Political Party (if applicable)

Republican

Office Sought

State Representative

District (If Senate or House)

11

FORM <b>DR-2</b> (Rev. 12/2005)	DISCLOSURE REPORT
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Comm. #	<u>968</u>
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Henry V. Rayhons

SIGNATURE OF PERSON FILING REPORT

641-923-2979

TELEPHONE

10-17-08

DATE SIGNED

I AM FILING A

10-19-08

(report date)

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR

Indicate by #

1

☐ CHECK IF AMENDMENT TO REPORT DATED

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
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which Election is held

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CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

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**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

13,952.50

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$

25,646.66

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

10,022.01

Schedule F: Loan Repayments total (Attach Schedule F)

13,250.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$

2,374.65

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\$

0

2,374.65

For Instructions, See Back of Form

Reset Form

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Rayhons for State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
8/5/08	ID# 6116 CK# 1407	Iowa auto Dealers West Des Moines Ia. 50266		\$ 100 <sup>00</sup>	<input type="checkbox"/>
8/5/08	ID# CK# 2351	Neil Good nature P.O. Box 39 Garner, Ia. 50438		20 <sup>00</sup>	<input type="checkbox"/>
8/5/08	ID# CK# 1316	Gerald benz Garner, Ia. 50438		25 <sup>00</sup>	<input type="checkbox"/>
8/5/08	ID# 6155 CK# 4619	Iowans for Tax Relief Muscatine, Ia. 52761		500 <sup>00</sup>	<input type="checkbox"/>
8/5/08	ID# 6067 <sup>6067</sup> CK# 3873	Iowa Health West Des Moines, Ia. 50266		200 <sup>00</sup>	<input type="checkbox"/>
8/6/08	ID# 6056 CK# 3708	Iowa Bankers Johnston, Ia. 50131		1,000 <sup>00</sup>	<input type="checkbox"/>
8/4/08	ID# 6073 CK# 1202	Iowa Medical West Des Moines, Ia. 50265		125 <sup>00</sup>	<input type="checkbox"/>
8/18/08	ID# 6004 CK# 4747	Assoc. Gen. Contractors Des Moines, Ia. 50309		1500 <sup>00</sup>	<input type="checkbox"/>
8/18/08	ID# 6021 CK# 2263	Credit Union Des Moines, Ia. 50306		1,000 <sup>00</sup>	<input type="checkbox"/>
8/18/08	ID# CK# 10134	Tim Tusha Garner, Ia. 50438		250 <sup>00</sup>	<input type="checkbox"/>

SUB-TOTAL

\$ 4720<sup>00</sup>

TOTAL (if last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 4  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Ragbans for State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
8/19/08	ID# CK# 7391	David Kabrick Britt, Ia. 50423		\$ 500.00	<input type="checkbox"/>
8/19/08	ID# CK# 5193	Mark Huling Garner, Ia. 50438		250.00	<input type="checkbox"/>
8/20/08	ID# CK# 9099	David Steffens Lake Mills, Ia. 50450		500.00	<input type="checkbox"/>
8/20/08	ID# CK# 2346	Bill John Clear Lake, Ia. 50428		400.00	<input type="checkbox"/>
8/20/08	ID# CK# 60946	Roger Schmidt Garner, Ia. 50438		250.00	<input type="checkbox"/>
8/21/08	ID# CK# 5349	Terry Waggoner Lake Mills, Ia. 50450		200.00	<input type="checkbox"/>
8/21/08	ID# CK# 2060	Richard Formanek 1523 285th St. Garner, Ia. 50438		487.50	<input type="checkbox"/>
8/21/08	ID# 6062 CK# 360	Public Acc. 950 Office Park Rd. Suite 300 West Des Moines, Ia. 50265	50265	200.00	<input type="checkbox"/>
9/1/08	ID# 6433 CK#	Alliant Energy 321 East Walnut Suite 373 P.O. Box 6187 Des Moines 50309		250.00	<input type="checkbox"/>
9/10/08	ID# CK# 4301	James Nelson 390 2nd St. S.W. Britt, Ia. 50423		25.00	<input type="checkbox"/>

SUB-TOTAL

\$ 3062.50

TOTAL (if last page of this schedule)

\$

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Page 2 of 4  
(for Schedule A)

For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

*Rayhons for State Representative*

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
<i>9/15/08</i>	ID# CK# <i>4121</i>	<i>Robert Prohaska 355 Country Club Dr. Garnett, Ia. 50438</i>		<i>\$ 100<sup>00</sup></i>	
<i>9/23/08</i>	ID# <i>6237</i> CK# <i>2071</i>	<i>Abate 601 Highland homes Rd. Marshalltown, Ia. 50158</i>		<i>200<sup>00</sup></i>	
<i>9/26/08</i>	ID# CK# <i>1877</i>	<i>Frank Stork 636 Grand Ave. Station 13 Des Moines, Ia. 50309</i>		<i>200<sup>00</sup></i>	
<i>9/26/08</i>	ID# <i>8473</i> CK# <i>1380</i>	<i>Black Hill Energy 1701 48th St. Suite 1200 West Des Moines, Ia. 50266</i>		<i>200<sup>00</sup></i>	
<i>10/6/08</i>	ID# CK# <i>6318</i>	<i>Randy Yeaker 316 N. Walnut Kenawaha, Ia. 50447</i>		<i>20<sup>00</sup></i>	
<i>10/6/08</i>	ID# <i>6323</i> CK# <i>3166</i>	<i>Master Builders 221 Park St P.O. Box 695 Des Moines, Ia. 50300</i>		<i>500<sup>00</sup></i>	
<i>10/6/08</i>	ID# <i>6146</i> CK# <i>1788</i>	<i>Homebuilders 4201 Western Suite 250 West Des Moines, Ia. 50266</i>		<i>100<sup>00</sup></i>	
<i>10/2/08</i>	ID# CK# <i>4556</i>	<i>David Kingland 145 East 8th St. Forrest City, Ia. 50436</i>		<i>100<sup>00</sup></i>	
<i>10/2/08</i>	ID# <i>9742</i> CK# <i>1186</i>	<i>All Children Matter 329 43rd St. Des Moines, Ia. 50312</i>		<i>500<sup>00</sup></i>	
<i>10/2/08</i>	ID# CK# <i>8940</i>	<i>Terry Weidemeir 116 Main St. Box 323 Buffalo Center, Ia. 50424</i>		<i>50<sup>00</sup></i>	

SUB-TOTAL

*\$ 1970*

TOTAL (if last page of this schedule)

\$

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Page *3* of *4*  
(for Schedule A)

For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Rayhons for State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10/2/08	ID# CK# 6605	Jack Koenen 209 South Clark ST. Forest City, Ia. 50436		\$ 100 <sup>00</sup>	
✓ 10/2/08	ID# 6058 CK# 4291	Iowa Chiropractors 1605 N. Ankeny Ankeny, Ia 50023		100 <sup>00</sup>	
✓ 10/8/08	ID# 6064 CK# 2266	Iowa F O R E 8525 Douglas Ave Des Moines, Ia. 50322		500 <sup>00</sup>	
✓ 10/8/08	ID# 6234 CK# 1089	Farm Bureau PAC 5400 University Ave West Des Moines 50266		1,000 <sup>00</sup>	
✓ 10/9/08	ID# 6155 CK# 4700	I T R Iowans for Tax Relief P.O. Box 209 Muscatine, Ia. 52761		500 <sup>00</sup>	
✓ 10/9/08	ID# 8028 CK# 2403	Monsanto Citz Fund 800 N. Lindergh Blvd St. Louis, Mo. 63167		250 <sup>00</sup>	
✓ 10/9/08	ID# 9774 CK# 111	Penn Gaming Employee PAC P.O. Box 1750 Dubuque, Ia. 52004		1500 <sup>00</sup>	
✓ 10/15/08	ID# 6042 CK# 1369	Graciers 2540 106th St. SE 102 Des Moines, Ia. 50322		250 <sup>00</sup>	
	ID# CK#				
	ID# CK#				

SUB-TOTAL

\$ 4200<sup>00</sup>

TOTAL (if last page of this schedule)

\$ 13,952<sup>50</sup>

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Page 4 of 4  
(for Schedule A)

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Rayhons for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8/1/08	ID# 9193 CK# 2646	Winnipeg Rep. F.C. Ia.	picnic	\$ 20 <sup>00</sup>
8/2/08	ID# 26479083 CK#	Hancock Rep. Garner, Ia.	picnic	25 <sup>00</sup>
8/2/08	ID# 9033 CK# 2648	C. Lake Cerro Gordo Rep.	picnic	30 <sup>00</sup>
8/3/08	ID# CK# 2649	Fertile Fire Fertile, Ia.	supper	20 <sup>00</sup>
8/7/08	ID# CK# 2651	F.C. Church Forest City, Ia.	supper	10 <sup>00</sup>
8/20/08	ID# CK# 2652	Garner, Library Garner, Ia.	donation	50 <sup>00</sup>
8/26/08	ID# CK# 2654	Manly Lutheran Manly, Ia.	supper	15 <sup>00</sup>
8/30/08	ID# CK# 2655	G.H. School Garner, Ia.	adv.	50 <sup>00</sup>
SUB-TOTAL				\$ 220 <sup>00</sup>
TOTAL (if last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Rayhans for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8/30/08	ID# CK# 2656	U. S. Post Office Garney Ia.	stamps	\$ 84 <sup>00</sup>
9/10/08	ID# CK# 2657	F.C. Summit Forest City, Ia.	adv.	500 <sup>00</sup>
9/10/08	ID# CK# 2658	Bethel Methodist Manly, Ia.	meals	14 <sup>00</sup>
9/20/08	ID# CK# 2659	Crystal Lake Methodist Crystal Lake, Ia.	meals	16 <sup>00</sup>
9/25/08	ID# 9161 CK# 2660	Republican Party, Ia. Des Moines, Ia.	adv. mailers	\$ 5,000 <sup>00</sup>
10/11/08	ID# CK# 2661	Bethlehem Church Manly	meal	6 <sup>25</sup>
10/12/08	ID# CK# 2662	Kensett Fire Kensett, Ia.	meal	20 <sup>00</sup>
10/13/08	ID# CK# 2663	Britt Fire Britt, Ia.	lunch	20 <sup>00</sup>

SUB-TOTAL	\$ 5,660 <sup>25</sup>
TOTAL (if last page of this schedule)	\$

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)



FOR INSTRUCTIONS, SEE BACK OF FORM

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Raylons for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/13/08	ID# CK# 2665	Britt Summit Britt, Ia.	adv.	\$ 921 <sup>75</sup>
10/15/08	ID# CK# 2666	Northwood, Ia. Northwood Anchor	adv.	750 <sup>00</sup>
10/15/08	ID# CK# 2667	Miller Church Miller, Ia.	meals	12 <sup>00</sup>
10/16/08	ID# CK# 2668	See corrected page		239 <sup>40</sup>
10/16/08	ID# CK# 2669			309 <sup>00</sup>
10/16/08	ID# CK# 2670			207 <sup>00</sup>
10/16/08	ID# CK# 2671			409 <sup>60</sup>
10/16/08	ID# CK# 2672			1293 <sup>01</sup>
SUB-TOTAL				\$ 4,141.76
TOTAL (if last page of this schedule)				\$ 10,022.01

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

2008 DEC 19 AM 8:53

## EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Raylons for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/13/08	ID# CK# 2665	Britt Summit Britt, Ia.	adv.	\$921 <sup>75</sup>
10/15/08	ID# CK# 2666	Northwood, Ia. Northwood Anchor	adv.	750 <sup>00</sup>
10/15/08	ID# CK# 2667	Miller Church Miller, Ia.	meals	12 <sup>00</sup>
10/16/08	ID# CK# 2668	B.C. Tribune Buffalo Center, Ia.	adv.	239 <sup>40</sup>
10/16/08	ID# CK# 2669	L. Mills Graphic Lake Mills, Ia.	adv.	309 <sup>00</sup>
10/16/08	ID# CK# 2670	K10W radio Forest City, Ia.	adv.	207 <sup>00</sup>
10/16/08	ID# CK# 2671	Garner Leader Garner, Ia.	adv.	409 <sup>60</sup>
10/16/08	ID# CK# 2672	Discover Card Kaiser - Blair Nat. Office	Campaign hangers adv.	1293 <sup>01</sup>
SUB-TOTAL				\$ 4141.76
TOTAL (If last page of this schedule)				\$ 10,022.01

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(I).)

COMMITTEE NAME (Must be same as on Statement of Organization)

Rayhons for State Representative

SCHEDULE

E

(Rev. 06/97)

IN KIND  
CONTRIBUTIONS☐ CHECK THIS BOX IF  
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/1/08	Republican Party 621 E. 9th St. 50309 Des Moines, Iowa			\$ 386.12	
10/2/08	Republican Party of Iowa			369.70	

SUB-TOTAL

\$

TOTAL (if last

\$

page of this  
schedule)

755.82

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule E)

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

Rayhons for State Representative

SCHEDULE

F

(Rev. 07/03)

LOANS  
RECEIVED  
& REPAYED☐ CHECK THIS BOX IF  
AMENDING FORM

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 13,250<sup>00</sup>

## PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$

TOTAL (PART I)

\$

## PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
8/21/08	H.V. Rayhons 2820 Oak Ave. Garner, Ia. 50438		\$ 10,000 <sup>00</sup>
10/13/08	H.V. Rayhons 2820 Oak Ave. Garner, Ia. 50438		2500 <sup>00</sup>
10/10/08	Donna Rayhons 2820 Oak Ave Garner, Ia. 50438	wife	750 <sup>00</sup>

TOTAL CASH REPAYMENTS (PART II)

\$ 13,250<sup>00</sup>

From Schedule E -- TOTAL LOANS FORGIVEN

\$

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\$ 0

\*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

Page 1 of 1  
(for Schedule F)